


Communications with Respect to People with Disabilities

	Louisiana Department of Health (LDH)	
	Policy Number	1.2
	Content	Use of respectful language when referring to people with disabilities
	Effective Date	April 3, 2019
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If there is a discrepancy between an LDH Policy and a Program Office or facility policy, the LDH policy shall govern/override/supersede the conflicting section within the Program Office or facility policy.

I. PURPOSE

This policy is to ensure that all communications with and related to people with disabilities are affirmative and respectful.

The intent of this policy is to provide guidance to LDH employees and to provide a foundation for training, information and educational opportunities that produce changes in the language we use that ensures respect for all people with disabilities.

This policy shall not be used as the basis for any disciplinary action or discrimination against any employee who fails to adopt the elements of the policy described herein.

In addition, the policy is not intended to impede accurate communication about medical diagnoses, but rather, to affirm the dignity of people with disabilities and foster positive attitudes.

II. APPLICABILITY

This policy applies to all LDH employees.

III. IMPLEMENTATION

The effective date of this policy is April 3, 2019.

IV. POLICY STATEMENT

It is the policy of the Louisiana Department of Health to use written and oral language that reflects the individuality and dignity of people with disabilities.

- A. The Department recognizes that disability is a natural part of the human experience. It is, like gender and ethnicity, one of many characteristics of being human.
- B. The Department acknowledges that words have power, the power to shape the way people think, feel, and act towards others. When a group of people wants understanding and acceptance, attention to the language used in talking and writing about them is particularly important.
- C. Departmental employees have the opportunity to impact how people with disabilities are viewed, treated and responded to. The Department, therefore, adopts the use of positive language.

Such positive language refers to the person first, and then addresses traits or characteristics. It puts the person before the disability and describes what a person has, not what a person is. Positive language promotes understanding, respect, dignity and affirmative outlooks.

V. GUIDELINES FOR USING POSITIVE LANGUAGE

- A. In preparing documents and presentations and in general oral conversations, each employee of the Department should consider the following:
 - 1. Positive communication affirms the dignity of people with disabilities and fosters positive attitudes. A person's self-image is strongly tied to the words used to describe the person. Referring to a person with a disability by a medical diagnosis (i.e., an epileptic or a quadriplegic) or with an inappropriate age reference (i.e., referring to someone who is over age 22 years as a child) devalues and disrespects him or her as a member of society. The terms "handicapped" and "disabled" typically evoke negative feelings and creates a stereotypical perception that people with disabilities are all

alike. "People First Language" refers to the person first and then addresses traits or characteristics. It puts the person before the disability; it describes what a person has, not what a person is. Such positive communication is a means of bringing about acceptance and appreciation of people with disabilities.

2. Ask yourself whether it is necessary to mention disability in all cases. The term should only be used when it is significant to the conversation or understanding of written material.
 3. Emphasis should be placed on abilities, rather than limitations. Consider, for example, that wheelchairs allow people to be mobile, rather than being confined.
 4. Avoid negative words or those that sensationalize disabilities. Words like "suffer", "tragedy", "problem" and "afflicted" are considered offensive.
 5. "Problems" or "deficits" should be framed as needs. This is the traditional way that we refer to the supports we all need to operate, i.e., "I need glasses," rather than "I have a visual deficit."
 6. Avoid euphemisms such as "differently-abled," and "special," when what is meant is segregated. The exception is where the term "special" is used as a part of a proper name as in "Special Olympics."
 7. "Consumers" use things; while "customers" are served. "Recipients" receive things/services; while "participants" take part. Always consider the connotation.
- B. It is not the intent of this policy to impede communications in medical settings. Where the general population would be referred to as "patients" or "clients," that same term is properly used in reference to persons with disabilities.

VI. RESPONSIBILITY

- A. It is the responsibility of each office/division/bureau to promote the use of positive language. The Department recognizes, however, the changes demanded in this policy require a cultural shift that will not occur immediately, but over time and with support and training.
- B. LDH staff have the opportunity to impact how people with disabilities are viewed, treated, and responded to in this state. It is the responsibility of all LDH staff to provide leadership by practicing and promoting the use of "People First Language" in communicating with, writing about, and referring to people with developmental disabilities (See Attachment A for examples of "People First Language.")

- C. Each office/division/bureau is responsible for providing orientation, training, information and educational materials regarding the use of positive language to its employees.
- D. Within each office/division/bureau, written materials, particularly those that will be shared with the public, are to be reviewed prior to distribution to ensure the use of respectful language. It is also important that positive language be used in individual planning documents and other materials written about specific individuals being served.

VII. REFERENCES

A variety of resources were used in the preparation of this policy, including work by Kathie Snow at www.disabilityisnatural.com, the State of Texas Developmental Disabilities Council, Otto F. Wahl, Ph.D. at George Mason University, and the Nebraska Department of Health and Human Services.

VIII. REVISION HISTORY

Date	Revision
December 31, 2003	Policy created
November 12, 2012	Policy revised
April 3, 2019	Policy revised

People First Language (Attachment A)

Examples to Use and Share

By Kathie Snow

<https://www.disabilityisnatural.com/people-first-language.html>

Labels Not to Use...	People First Language...
The handicapped or the disabled	People with disabilities
The mentally retarded or he's retarded	People with mental retardation or he has a cognitive impairment
My son is autistic	My son has autism
She's a Down's; she's mongoloid	She has Down Syndrome
Birth defect	Has a congenital disability
Epileptic	A person with epilepsy
Wheelchair bound or confined to a wheelchair	Uses a wheelchair or a mobility chair or is a wheelchair user
She is developmentally delayed	She has a developmental delay
He's crippled; lame	He has an orthopedic disability
She's a dwarf (or midget)	She has short stature
Mute; nonverbal	He does not use words to communicate
Is learning disabled or LD	Has a learning disability
Afflicted with, suffers from, victim of	Person who has ...
She's emotionally disturbed; she's crazy	She has an emotional disability; she has a behavioral health condition/disorder
Normal and/or healthy	A person without a disability
Quadriplegic, paraplegic, etc	He has quadriplegia, paraplegia, etc.

She's in Special Ed	She receives Special Ed services
Handicapped parking	Accessible parking